



# Cavendish Ward

## St Mary's Hospital

Level 2 mental health rehabilitation  
inpatient services (higher support needs)

### Service at a glance:

**2** Level 2 service

 17 beds total

 Service for **men**

 Age **18** and over



Cavendish Ward is a Level 2 Rehabilitation ward located within the grounds of St Mary's Hospital, which provides rehabilitation, care and treatment to people with a diagnosis of brain injury, including neurodegenerative disorders with complex needs and behaviours that challenge.



## Who we support

Cavendish Ward is a 13 bed ward that supports men aged 18 and over with an Acquired Brain Injury (ABI) and/or a diverse mixture of medical, physical, sensory, cognitive, communication, behavioural, and social problems.

These may include neuropsychological impairment, challenging behaviour, forensic history, risk to themselves or others and co-morbid mental health conditions which do not require secure services but require more intensive rehabilitation.

Patients may be detained under the Mental Health Act 1983 (amended 2007). The service contains both a traditional ward-based environment and four bespoke self-contained living spaces known as 'The Flats'

## The Flats

The four flats, are separate to Cavendish Ward although, they share the same staffing team. They are self-contained living spaces for patients who have complex needs who require an enhanced level of support and care. The Flats support patients who need to live separately due to vulnerability or risk, or those who require bespoke levels of support not available in a larger, integrated ward setting.

Both services support and provide rehabilitation opportunities to people moving towards increased independence by increasing their skills and confidence in preparation for community living.

The clinical team work collaboratively with patients and community mental health rehabilitation teams, primary care services, community learning disability, neuroscience (ABI) teams to support the agreed pathway. Rehabilitation will routinely involve regular engagement with community resources and agencies, including employment support, education, housing and welfare.

## What we do

The aims of the service are in line with the World Health Organisation International Classification of Functioning, Disability and Health (2013) recommendations, NICE guidance for Head Injury (2014) and the evidence base for modern Neurorehabilitation (Evans, 2019):

The service aims to ensure that rehabilitation interventions are person centred and work towards achieving the following principles:

- Preventing the loss of function
- Slowing the rate of loss of function
- Improving or restoring function
- Compensating for lost function
- Maintaining current function

The service aims to deliver the following outcomes for patients admitted to Cavendish ward:

- Adopt a proactive approach to discharge planning, invite carers and home area professionals to work with us from the time of admission
- To successfully discharge from our service to both individual and supported accommodation, under section 117 aftercare, CTOs, Conditional Discharge and DoLS
- Effective management of behaviours that challenge
- Maintaining good physical health for all patients



## What support we offer

The service strives to deliver a trauma-informed approach and be aware of the complexities nuances of every patient's presentation.

The clinical team explore long-standing patterns of thinking and behaviour and consider how to empower a patient to adapt and manage their presenting issues. Therapeutic interventions are paced according to everyone's needs, level of insight and ability, to ensure patients are not overwhelmed by their experiences or by the potential for change or become further distressed or traumatised from it.

A variety of treatments are offered to address cognitive, affective, interpersonal, and situational factors contributing to the patient's situation and to enhance recovery. These include:

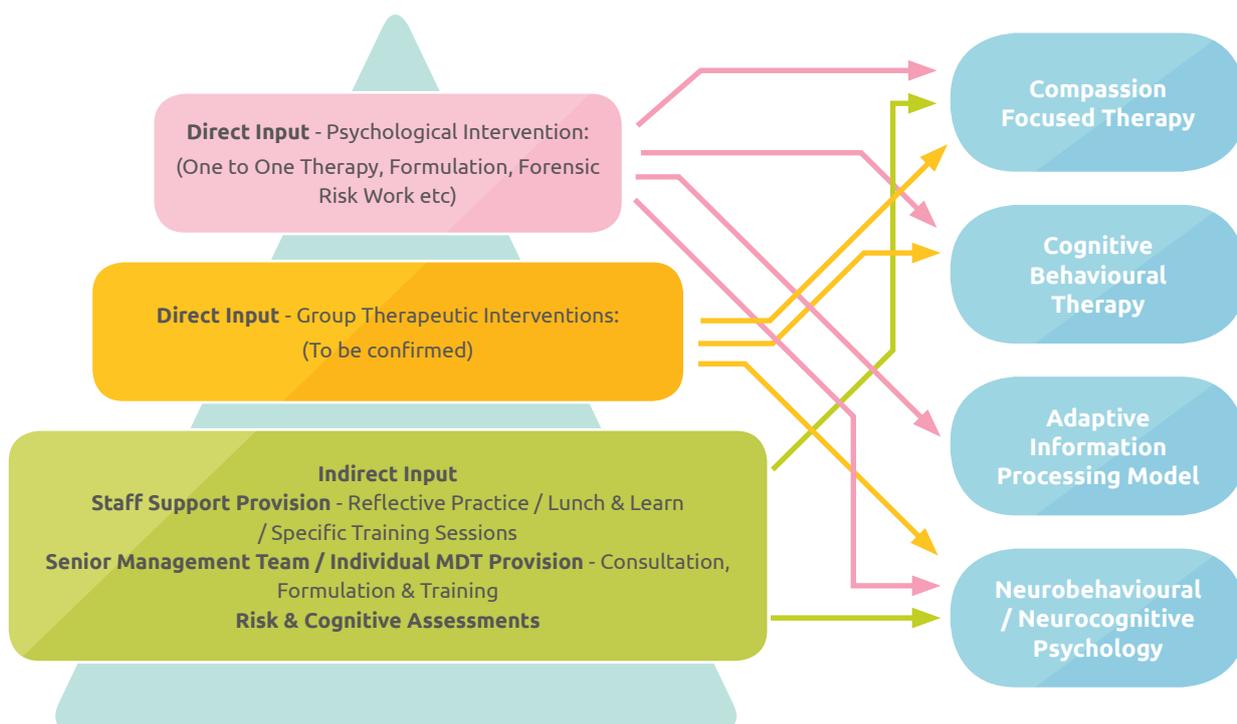
- Core treatments: physical health, mental health, substance misuse, offending behaviours
- Rehabilitation: self-care, activities of daily living (ADL), education, provision of meaningful activities, occupation, and creativity
- Tiered treatments and competencies: supportive therapy, psychoeducation, specific individual, and group therapies

Rehabilitation will include access to psychological intervention (Cognitive assessment, forensic risk assessment, and psychological interventions), according to their individual needs.

Interventions include different therapeutic modalities to maximise engagement and effectiveness with each patient. The psychological service is underpinned by several evidence-based approaches in line with NICE Guidance (See service model below)

## Psychological Services Model

Underpinning Theoretical / Evidence Based Approaches





## Enabling individuals to reach full potential

Patients have access to specific therapy delivered by experienced Multidisciplinary Team (MDT) members and designed to meet their needs. This includes both group based and one-to-one based interventions.

Specific therapeutic modalities include:

- Compassion Focused Therapy (CFT)
- Cognitive Behavioural Therapy (CBT)
- Acceptance and Commitment Therapy
- Eye-movement Desensitization and Reprocessing Therapy (EMDR)

The service advocates the importance of vocational opportunities for individuals' health and wellbeing.

Patients of working age are encouraged to consider work opportunities, voluntary roles

and education as part of their rehabilitation programme. There is a variety of work and education opportunities available in service and in community services.

Patients who are not of traditional working ages are still encouraged to engage in vocational opportunities to enhance their quality of life.

## The team

Patients are supported by a multidisciplinary team with the appropriate training, skills, and knowledge in acquired brain injury rehabilitation, mental health rehabilitation, Neurobehavioural support, and risk assessment and management strategies.

Neurobehavioral rehabilitation involves the active care of patients with an acquired brain injury. Specialist input is available from a wide range of rehabilitation disciplines, nursing, physiotherapy, occupational therapy, speech and language therapy, psychology, dietetics, social work, and specialist medical input from a Consultant Psychiatrist completing training in neuropsychiatry.

## Our values



### Kindness -

in everything we say and do

### Integrity -

being honest and doing the right thing

### Teamwork -

working together to deliver great care and outcomes

### Excellence -

being outstanding at what we do

## How to make a referral:



24h referral line **0800 218 2398**



Send an email to:

[referrals@elysiumhealthcare.co.uk](mailto:referrals@elysiumhealthcare.co.uk)

This information is available in different languages, Braille, Easy Read and BSL on request

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**E: [stmarys@elysiumhealthcare.co.uk](mailto:stmarys@elysiumhealthcare.co.uk)**

*Images used are of similar services at Elysium and are intended as a guide.*



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[elysiumhealthcare.co.uk](http://elysiumhealthcare.co.uk)

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